

CLAIMS ONLY						Application Number 10/626661	Filing Date				
						Applicant(s)					
						* May be used for additional claims or amendments					
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend			
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend			
1			1				51				
2				1			52				
3			1				53				
4				1			54				
5							55				
6			1				56				
7				1			57				
8					6		58				
9							59				
10			1				60				
11				1			61				
12			1				62				
13				1			63				
14			1				64				
15							65				
16							66				
17			1				67				
18				1			68				
19					1		69				
20							70				
21							71				
22			9				72				
23							73				
24			1				74				
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44							94				
45							95				
46							96				
47							97				
48							98				
49							99				
50							100				
Total Indep			8				Total Indep				
Total Depend			12				Total Depend				
Total Claims			20				Total Claims				

can't say "and"